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"ALMOST NOTHING HAS CHANGED": ORDINARY ETHICS AND FORMS OF LIFE IN PANDEMIC TIMES

There is a long history of thinking that ordinary life does not require work in order to be maintained, that it has the force of habit and that it will therefore go on sustaining itself. I think part of the challenge with regard to this manner of thinking about the ordinary is a methodological one, so it is argued that methodologically one can best detect agency at moments of resistance or at moments of transgression, because of the presumption that ordinary life just goes on into the kind of flux in which it is not obvious that the act of actual agency could be located. And my argument throughout has been to state that we need to think about agency in much more complex ways. I see everyday life as a kind of achievement, not just as part of habit. I also believe that there is a certain kind of heroic model of resistance, a romance of resistance. And the kind of work that needs to be done to maintain the everyday, and the ways in which the ordinary and the extraordinary are braided together in our ordinary lives are theoretically much more difficult to understand. Throughout very extraordinary moments, all kinds of ordinary things have to continue to be done. And it seems to me that, very often, it is at this junction that we lose interest in what is at stake. By underlining that resistance can be romanticized, I do not mean that the notion of resistance is never to be appreciated, or that it never plays any role. But I want to think of moments of resistance as also integrated and carried forward into ordinary life.

Veena Das (DiFruscia, 2010)

"Almost nothing has changed," "very little has changed," "…the only thing I stopped doing is travelling, the rest carries on as normal." These were some of the responses, somewhat surprising perhaps, given by many of the people interviewed in our anthropological research, undertaken since July 2020, concerning the impacts of the covid-19 pandemic on those legally classified as senior citizens – that is, people over the age of 60.[1] The research focuses on relational bonds and care infrastructures, seeking to increase the visibility of their experiences, exploring an understanding of the pandemic that prioritizes the small, everyday practices and actions that the health emergency elicits (Biehl & Petryna, 2013; Das, 2020a; Fleischer & Lima, 2020).

The interviewees' idea that "almost nothing has changed" was initially puzzling: after all, the pandemic seemed to interrupt and reorganise lives in dramatic form. How should we understand their insistence on the persistence of ways of life amid so many transformations? Analysing other parts of the narratives of the people in the study, we saw that these initial phrases contrasted sharply with other narrative moments in which the subjects reported the countless situations in which their everyday lives had been affected. Conversations included mention of the restrictions on mobility and strategic social distancing, the introduction of new modes of personal protection, and diverse emotional responses that ranged from indignation to resignation in reaction to the coercive measures imposed to regulate behaviour. These measures were targeted at the elderly in particular, given that this population was classified as a preferential 'risk group' during the pandemic.[2]

Rather than exploring the potential contradictions in the discourse of the people collaborating in our research, or any supposedly distorted perception or denial of immediate reality, we argue that the responses only appear to minimize the impact of the pandemic or to distort reality. In fact, we venture the hypothesis that they reveal more about everyday actions and the routine efforts made – very often invisible or rendered so – to maintain ordinary life in response to an extraordinary event like the covid-19 pandemic. Echoing the opening citation of Veena Das (DiFruscia, 2010), we believe that understanding the entanglements between the ordinary and extraordinary is essential, since paying attention to these aspects can reveal the strategies and mechanisms through which ordinary life continues to be produced during extraordinary times, and how, conversely, extraordinary moments populate ordinary life. In pandemic times, this attention can also reveal the importance of the everyday care infrastructures and the peculiar and singular ways that people reinhabit life through the efforts made to build their daily lives, produce new routines, imagine a liveable life. After all, how can an event like the covid-19 pandemic descend to the ordinary and inhabit life?

Setting out from these queries, we turn to focus on some aspects of the quotidian life of a white middle-class family living in southern Brazil during

the covid-19 pandemic. The idea is to explore this ethnographic narrative not because it represents processes generalizable to other research subjects but because it is capable of evoking, through the singularity of the narratives in question, a descent to the ordinary in which the infrastructures of domestic care – practices sensitive to the details of everyday life – come to the surface, revealing the emergence of an *ordinary ethics* (Das, 2015b). For this author, *ordinary ethics* is not based on universal principles or moral values, but emerges from the everyday experiences and real problems encountered by people in their daily life, which is the space in which they engage with the life of others. In this sense, *ordinary ethics*, rather than focusing on transcendental acts of heroism or resistance, begins with the mundane and the everyday, making them not just a source of ethics but also a space in which life can be reinhabited.

Taking this lead, we describe not just the efforts made to constitute an everyday life in pandemic times but also three generations living in the same home – one of the momentary strategies employed by the family during the health emergency – gave visibility to broader aspects surrounding differences in gender, age, race and class that permeate the everyday situated dynamics of care in this family.[3] Accompanying the unfolding of the practical solutions found by the people involved to respond to the dilemmas and challenges of sharing lives in the context of a health emergency, we saw that these dynamics developed in the domestic environment can be considered active infrastructures in which *forms of life* are performed.

The concept of *forms of life* that we make use of here, accompanying Das in her reading of Ludwig Wittgenstein and Stanley Cavell, is founded on the idea that language and the world are internal to one another. Thus, one cannot think of a *form of life* separate from language, more specifically from a *language game* that emerges in practical situations of the everyday. Without venturing more deeply into the theory of language in which the concepts of *forms of life* and *language games* were coined and developed, we believe it is important to reflect on how the language of the pandemic produces and signifies determined *forms of life*, especially by delineating important contours for those configured as 'elderly,' preferentially allocated as 'risk groups.' In the Wittgensteinian tradition, learning a language – for example, the language of the pandemic – entails far more than possessing knowledge of the names and sounds that designate objects and situations. It also involves learning how to relate with these *forms of life*. The following passage from Cavell (1999: 177-178) expounds on this point:

> In 'learning language' you learn not merely what the names of things are, but what a name is; not merely what the form of expression is for expressing a wish, but what expressing a wish is; not merely what the word for 'father' is, but what a father is; not merely what the word for 'love' is, but what love is. In learning language, you do not merely learn the pronunciation of sounds, and their grammatical orders, but the 'forms of life' which make those sounds the words they are, do what they do – e.g., name, call, point, express a wish or affection, indicate a choice or an aversion, etc...

Pursuing this idea, we argue that a fundamental connection exists between *ordinary ethics* and *forms of life*, and stress how domestic space not only provides a fundamental infrastructure of care in a scenario of social and political vulnerability, but also functions as an active element in which *forms of life* acquire form and life.

ANTHROPOLOGICAL RESEARCH, THE PANDEMIC AND THE DESCENT TO THE ORDINARY

Our research began in July 2020 and includes the use of interviews based on a semi-structured script of questions, which aim to comprehend: a) the networks and modes of protection; b) the everyday and conceptions of risk; c) perceptions of the pandemic. To the script we added a regular quarterly follow-up interview over the course of a year to discover how life unfolded during this atypical period. This strategy of regular encounters over a set period of time was inspired both by "longitudinal" epidemiological studies and by anthropological research that focuses on decisions relating to health, sickness and other long-term events. Among these studies, we can highlight the research conducted by Das and her team, described in the book *Affliction*, where they emphasize the importance of weekly follow-ups and recording the course of diseases, therapeutic regimes and their transformations, frequently based on decisions that combine economic factors, domestic organisation and family dynamics (Das, 2015a).[4]

As the author emphasizes, one limitation of the follow-up strategy – in the case of Das (2015a: 31), undertaken weekly – is that this practice "cut up the telling of illness-related events into weekly episodes", a limitation that appears to have restricted our own mode of data collection. At the same time, though, it has provided evidence of changes not only in the lives of the people investigated during this period, but also in the pandemic itself, in terms of forms of public communication, scientific evidence and the targeting of public policies, transforming them into specific themes of inquiry in the semi-structured scripts produced to foment the research dialogues.

The same dynamic of methodological limitations, which are also opportunities for study, applies when we consider the fact that, due to the potential risk of viral transmission through co-presence in the same physical space, the contacts between researchers and collaborators have been exclusively made through video and/or audio on WhatsApp. Unable to accompany the everyday practices of the houses and families in the way we would in classic ethnographic research, we paid special attention during the interviews to the subjects' particular forms of narrating the modes of perception, dilemmas and meanings relating to the prescriptive moral discourses on health and prevention behaviours targeted at them, as well as the public controversies surrounding the issue. In this case, these prescriptive moral discourses and the wider set of public controversies are elements that provoked the interviewed people to

elaborate reflections on their diverse ways of understanding and perceiving situations. When associated with a set of information on their modes of life, these elaborations provide an opportunity to discover the ways in which the pandemic inhabits the everyday of people's lives.

It should also be stressed that the type of follow-up we propose here looks to cultivate longer-term contacts as well, since these enable the densification of the relations between researchers and researched, facilitating the emergence of categories that make sense to the people studied and the kind of fundamental intersubjective exchange that characterizes anthropological research in general. It was with this aim of seeking to develop closer relations with the researched subjects that we made use of networks of relations in which the researchers already had some prior investment, seeking to associate the research conducted via WhatsApp with relations previously established with specific people and their own networks of relations. One of the latter networks was mobilized in the city of Santa Maria through contacts with people identified as elderly participants of groups of sociability and active aging linked to the Federal University of Santa Maria. These subjects were included in the research through pre-existing relations between these groups and the researchers Monalisa Dias de Siqueira and Taciane Jeske. It was through Taciane's mediation that we came to know the family of Marilene and Pedro, the focus of our discussions in this article.

Marilene and Pedro are white middle-class people, married for three decades, aged 60 and 68, respectively. In the interviews, they describe how before the pandemic they had a life filled with activities, whether in their home, exercising in the gym, going for walks or dining with friends. Unlike Pedro, already retired, Marilene still works as a primary school teacher and assists her 83-year-old mother who lives in her own apartment in the same city. The couple have a 28-year-old son, Daniel, who had been living in another city, studying for a postgraduate degree, but returned to the family home due to the isolation policies and the lack of new work opportunities after concluding his doctorate in biology, recently completed at the start of the pandemic.

As a member of one of the studied networks, we interviewed Pedro first. Always optimistic, he related that the pandemic had not altered his life much, beyond reducing the time spent with friends and having to use alcohol gel and masks, which, as he said: "is a bit uncomfortable, but I've already become accustomed…" On the other hand, the pandemic "added" dynamics that he considers positive to his life, especially with his son's return home and the novelties the latter brought with him. Although we had not initially planned to interview both members of the couple, we took the opportunity when it arose to interview Marilene. Her account showed us another – feminine – version of the pandemic. Although Marilene's activities have intensified greatly, in her assessment "the situation is hard work, but it's okay, it's fine." In the interview,

rich in details on everyday family life, she told us about the new dynamics of her work as a teacher of children aged from 8 to 9, which switched to remote form. She also described the new routines for cleaning domestic space, as well as the inclusion of her elderly mother and her son in the domestic unit. The changes in the home routine due to their son's return, which became apparent in the interviews with Pedro and Marilene, introduced other elements to the debate. This was why we decided it would be important to conduct an interview with Daniel too.

Daniel told us about the return to his parents' home at the end of his doctorate, which coincided with the start of the pandemic, and the interruption of his postdoctoral plan – and the scholarship he had won. As his grandmother was also now living in his parents' home, a move intended to provide her with better protection against coronavirus and was staying in his own room, Daniel occupied the guest room: "I didn't want to return to my original bedroom and disrupt grandma," he told us in the interview. He said that he would have preferred not to live with his parents again, retaining his independence, especially after the experience of living in another city and time spent in another country. Nevertheless, Daniel believes that living with his parents in the same house has been good and explains how the new routine unfolded and his decision that he would consider it a "sabbatical year," given that he would have to stay at home.

The references to his "grandma" (*vó*) and the conversations with her surface at various moments of the interviews with the couple and their son. Consequently, we thought it important for her to be heard too. We believed she would have a lot to tell us and could contribute significantly to the research, considering how she is a source of concern for the family, referred to sometimes as a "stubborn" person who "doesn't understand" and "sometimes plays up." However, our repeated requests to be presented to her were in vain. The family said that she would be unable to reply to the questions due to what they perceived to be her limited capacity for comprehension, given her "senility."

Another person whose presence also appeared in the interviews was the domestic worker, referred to as the *empregada* (housemaid), *cuidadora* (carer) and *secretária* (secretary) of the grandmother, which is why we made various attempts to talk to her. As well as being an important person in the family's relationship with the pandemic, she was the only member of this group of conviviality – along with all the members of her own family – who became sick with coronavirus. We thus asked Marilene to place us in contact with the domestic worker but she refused the request. The restrictions imposed on direct contact with the domestic worker and the grandmother tell us something about the organisation of the family's day-to-day relationships in this setting, as well as the constitution of forms of life amid the pandemic's *language games*. In the arguments developed in this article, therefore, we focus on the narratives of Pedro, Marilene and Daniel, produced at different moments, maintaining a de-

gree of tension between narrative fragments taken from each of them but, simultaneously, highlighting the important role played by the domestic space in interweaving their narratives.

EVERYDAY LIFE IN PANDEMIC TIMES: INFRASTRUCTURE OF DOMESTIC CARE

> ...So I brought my mother here, on the 16th, 17th, mother came here, because she's 83 years old and lives alone, a widow. Mother came here. She stayed until August the 3rd, she practically stayed four and a half months with us, but afterwards she couldn't stand it anymore, because she came with the expectation of staying for 15 days, a month at most. [But] the situation dragged on and she began to fall into a depression and I saw that the situation was bad, she ended up moving back to her own home.

This is how Marilene referred to one of the first – and most important – changes to occur in her everyday life at the start of the pandemic. A few days after the arrival of her mother, her son Daniel left the apartment he had been renting in the state capital[5] and also moved back to his parents' home. With a few days, the house was sheltering four adults from three different generations. The domestic space – the house – thus became a basic care infrastructure, understood as a practice "that includes everything that we do to maintain, continue and repair our world so that we can live in it in the best possible way" (Tronto, 2015: 3).

In the case in question, it was concern over her mother's "advanced age" that persuaded Marilene to bring her to live in her own house, since "she's already at a senile age, she forgets many things…" Daniel also says that he worries about "grandma" and believes that the "warning" he gave his parents about the greater susceptibility of elderly people in the pandemic contributed to the family's decision to remove his grandmother from her apartment:

> 'The risk group is elderly people'… I was immediately alarmed, 'if they catch it, they die.' I said about grandma: 'look, what's grandma like there alone, sometimes she goes out, she goes to the supermarket alone, do you think she'll take precautions? Sometimes she can't even see things properly, she forgets she has to clean.'

According to Daniel's narrative, as time passed "grandma" became increasingly impatient to return home. Marilene, as can be read in the excerpt that opens this section, related that her mother "began to fall into depression." Pedro also commented on his mother-in-law's decision, claiming: "she had her apartment, so she fought and fought until she got to return home…" In telling us details of the case, Daniel repeated one of his grandmother's phrases verbatim: "oh, I want to go back to my home, my space." According to her family, the elderly woman's insistence led to her family ceding to her wish to return home, but they still remained worried because, in their view, she failed to understand the gravity of the pandemic situation.

However, the return to her apartment was not a simple process. From the interviews it became clear that her move was the motive for a series of family discussions and decisions that included others beyond the immediate family, including Marilene's sister, maids/carers, and even the neighbours of the *idosa* (elderly woman). Soon after her return, the latter sent a "document" to Marilene's family, reporting a burning smell from the apartment. In the document, they claimed that the *idosa* could not live alone and that the condominium could issue a fine were this recommendation to be ignored.

The entrance of the neighbours into the family drama points to a fundamental dimension of care, namely the interpenetration of the public and private spheres and their intrinsically political dimension. What appeared to be the solution to a private, family problem, which responded to the express wish of a person to return to her "home," her "space," is deconstituted as such on being confronted by other social agents and a new context of power relations. The neighbours' interference precipitated the hiring of a domestic worker, but the first woman hired stayed only for a short time in the job, having been sacked by the *idosa*. The second person hired for the work remained for longer but, as mentioned earlier, became sick with coronavirus.

According to Marilene, around two months after starting work in her mother's home, the domestic worker arrived one day wearing a mask because she was coughing a lot. She recounted that her father and mother, with whom she lived, both had a fever and she was worried that she had caught the virus and might "transmit something to grandma." Fortunately, "grandma" had not been infected but the episode showed the complexity of the new condition in which Marilene's mother found herself. Her long-desired return to the apartment and stay there was only possible with the hiring of a maid, an activity itself sustained by class relations that enabled employment of a worker who, even in the pandemic context, remained available for work outside her own home. In the pandemic setting and in the view of the family, this movement, which aimed to prevent the worsening of her "depression," accentuated the public control over the "elderly" person at the same time as it required expanding her relations of conviviality. This obligation, in turn, entailed an increased risk of becoming infected, falling sick and even dying.

However, we cannot lose sight of the extent to which this episode reveals the class inequalities made visible by the pandemic and their intersections in terms of the gendering of care relations, manifestly female: as we noted, the domestic worker was the only person from this family network who, while following the social isolation guidelines, was available to work outside her home (Hirata & Guimarães, 2012; Hirata, 2014), thus making her more exposed to the danger of infection by the virus. At the same time, it manifests an important characteristic of care relations, namely their complexity, the interpenetration of the public and private spheres, and the political dimension, insofar as work,

gender, race, age and class relations all operated in this ordinary domestic space of Pedro and Marilene's house and the home of Marilene's mother, engendering a series of new practices that produce houses as care infrastructures.

On the other hand, the dynamics between the ordinary and the extraordinary also become evident. In the extraordinary time of the pandemic, the ordinary care relations continued to occur within the fabric of the already naturalized asymmetries of class, race and gender. Saying that care relations continued to unfold in the extraordinary time does not mean, though, that there were no modifications in the type or intensity of the tasks of maintaining life and wellbeing. Marilene, for example, who describes herself as a highly organised person with a "mania for cleaning," refers to the intensified precautions taken with everything entering from outside: the cleaning with water, soap, alcohol and in some cases *Qboa* (bleach) of everything coming into the home, including the soles of people's footwear and the tyres of the car parked in a garage partially integrated into the house, became a rule applied from the outset of the pandemic. Marilene emphasizes that everything put in the refrigerator – from the plastic bread wrapper to each of the eggs removed from their packaging – is carefully hygienized. She also tells us in detail about cleaning the house, done by herself and Pedro, who she considers her partner in these activities.

The care taken with the production of the house is just one aspect of the infrastructure of domestic care made evident by the pandemic. While her mother was staying in their home, Marilene says that "the precautions were redoubled." This meant reducing the mobility of Daniel who could not go to the gym to exercise, an activity that, he declared, was essential to his mental health. Moving back to his parents' house, the son brought, along with "a fully-equipped apartment," a number of pets: four rats and four tarantulas. Thus, Marilene's precautions in relation to her son and the pet animals also transformed the culinary routine of the house. Marilene has to "make different meals" for Daniel who does not eat red meat. As she herself describes: "*I put* a chicken [in the oven];" "*I make* him... meat balls, or a stew, or gnocchi [using soy protein];" "*I go* to the supermarket and *make sure* to buy a chicken sausage." As can be perceived through the verbs used, highlighted by us in italics, this care added a series of activities to her already busy life. As well as preparing meals for her son, Marilene also prepares the food for the rats, which she leaves in separate pots for her son or husband to feed them.

The house itself also needed to pass through a series of dis-organisations and re-organisations of its domestic spaces and times, as can be noted in the following account:

> So, *I had to organise* the guest bedroom for him and more of his stuff arrived. It caused quite a stir, then, because *I had to put* things that had been carefully stored there, *I had to put them* in my suitcase (...). So, it messed things up a bit, you know? From time to time *I become lost*, as Pedro says: '*how can you not know the whereabouts of stuff in your own house?*' but no, with the move, these two people arriving in the house, things changed a bit, you know?

In this dialogue, it is worth highlighting how much the husband's question (marked in bold) reveals the prominence of gender differences surrounding an issue that would appear to affect everyone in the house. As already shown in the previous comments on the meal routine, however, the actions (also highlighted in bold) are executed by Marilene who, despite reorganising things "that had been carefully stored," still became "lost" in the house. Responsibility for the latter is explicitly attributed to her by her husband. It did not go unnoticed by the researchers that Pedro's remarks were not made as a recognition of the work of reorganisation made by her, but as a complaint, like one made by a client to a manager who has failed to carry out her responsibilities adequately.

In making this observation, we have no wish to imply that Pedro does not assume any domestic responsibilities. All the interviews contain numerous references to his participation in the tasks of cleaning, hygienizing and maintaining the house. For example, he is the one who cleans the tyres of the car kept in the garage partially integrated with the house (mentioned in Marilene's interview); climbs up onto the roof, while Daniel holds the ladder, to make repairs (mentioned by Daniel); and cleans the rat cage (in the interview with Marilene and Pedro); as well as helping to clean the home. As Marilene says: "he's a real partner when it comes to helping me." But the very idea of "help" also signifies female protagonism in the care infrastructure created in this household, which may be related to broader feminist reflections that call attention to the gendering of unremunerated care work performed in the private sphere, overlooked in the capitalist system of production (Diniz, 2012; Hirata & Guimarães, 2012; Hirata, 2014; Thelen, 2015).

The idea of infrastructure that we adopt here takes as a reference point the work of Susan Star (1999), who emphasizes the relational nature of infrastructures, which come into existence via the different modes through which we relate to them. The author undertook research in contexts very different from the domestic. Nevertheless, anthropological studies, including the work of Danholt & Langstrup (2012), Langstrup (2013) and Fietz (2020), have suggested the pertinence of the referential framework of infrastructure for the study of care. Danholt and Langstrup (2012) conceive care infrastructures as: "the more or less embedded 'tracks' on which care may 'run,' shaping and being shaped by actors and settings along the way" (Danholt & Langstrup, 2012: 515). This definition accentuates both the relationality of infrastructures and their processual character, which, as highlighted by Gupta's examples (2018) too, manifest the extent to which infrastructures are not static objects but processes that require constant work, as in making and remaking the homes of Marilene and Pedro, Daniel and Marilene's mother.

Among the properties of the infrastructures identifiable in the domestic context is their embeddedness: in other words, the infrastructure is interpenetrated by other structures, social arrangements and technologies, such that

its coordinated parts are not perceptible separately. In the case of this family, for example, the care that Marilene dispenses to her mother and to preparing the feed for her son's rats are not perceived as coordinated components of the domestic infrastructure. They exist immersed in the social assemblage in which she performs the specific gender role of mother.

Another property of infrastructures, according to Star (1999), is their transparency: in other words, their presence is invisible in the support provided to specific tasks. In our study, this becomes clearly evident in the way in which Marilene's mother and son were accommodated in the household. It was unnecessary to reinvent or assemble the house and the relations sustaining it due to the particularity of the event since the couple and their home comprised an invisible infrastructure that also integrated the extraordinary event into the ordinariness of the quotidian tasks and dynamics. Furthermore, infrastructures are naturalized by those participating in them; they are spatially and temporally encompassing; they are linked to conventions; they are constructed on an already installed base, thereby inheriting both its strong points and its limitations; and they only become visible when they fail.

It is the fact that infrastructures bear these properties – of being embedded, transparent, naturalized, encompassing, reproducing conventional relations, and only becoming visible when they fail – that the task of analysing them poses a major challenge. It is an essential task, though, the only one compatible with Das's proposal, taken up by us here, of revealing the detailed work involved in making the everyday. It is through analysis of the latter that we can understand the perception of the collaborators in this research that "almost nothing changed." The "extraordinariness" of the pandemic is a time/space that co-exists in the ordinariness of the infrastructure, the interrelations that sustain it, and the forms of life that populate it. These are interrelations that, as we discuss below, are not grounded in an ethics contained in manuals or in abstract moral principles, in part because, as Sandra Laugier (2016: 222) suggests, "These contexts of extraordinary and ordinary life are governed by relations that cannot be made even perceptible or visible through the orthodox concepts of ethics (justice, impartiality, catalogue of duties, rational choice etc.)." They are everyday care experiences guides by an *ordinary ethics* in the space where lives become mutually entangled.

LIFE LIVED WITH OTHER PEOPLE: CARE RELATIONS AND ORDINARY ETHICS

Through the narratives of Marilene, Pedro and Daniel, we were able to visualise and comprehend a series of relations that have sustained the care infrastructure during this "extraordinary" time. In this section, we wish to focus on two specific relations: Marilene's relation with the school where she works, including the students and their families, where the connection between ordinary ethics and care becomes evident; and the relation between Daniel and his grandmother, where the tension between care and control comes to the fore.

Marilene, the school and children: teaching at a distance, affect and voice

Marilene has been a primary school teacher for 37 years. She explained to us that she is retired but continues to work 20 hours a week because the school-work brings her such satisfaction. She likes how children run to hug her when they catch sight of her on the other side of the street. She describes the school environment as pleasant and fun, emphasizing the day-to-day interactions with work colleagues, the birthday celebrations and the various festivities held throughout the year. These are the activities that she has most missed, she says, since classes began to be taught remotely due to the pandemic. We turn to her own narrative about how the work has unfolded since then:

> Before I worked 20 [hours a week[. But with the pandemic, I'm working 40, because the work has doubled, you know?! So, assisting the children all happens online, it's very, like... you have to be there the whole time helping them, although we send activities. Usually, I send an activity for them in the morning, because some parents work in the afternoon, so, I like to do activities with the children, help them in the morning. Others prefer the afternoon. So around eight, eight--thirty, I'm already sending an activity, I'm already on the computer. Then some already reply to me around nine, nine and a bit, while others leave it until the afternoon. So, I mean, I'm busy all day, you know!? Because I used to work in the afternoon only, from one to five. Now, though, I work in the morning from eight – not counting the numerous live streams, lots of conferences, which we have to watch, which is demanded of us, right?! Partly because we too have to learn, you have to keep uptodate. So that's how it is, I spend all my time on the computer and later, there's no set time, right, because, given they are small children, they frequently call you or want to contact you, more to hear your voice. It's clear that they are very needy of attention. Also, there are parents who work too and since we want, you know, we don't want to lose students, we sometimes reply to parents at ten o'clock at night. You're answering a parent, who has some doubt, they've arrived from work, they had been unable to check the activity with the child during the day, whether the child had some doubts, they didn't want to ask, nor the parent. So sometimes it's ten o'clock at night and I'm still on the computer, answering and marking work, it's hard work, the situation is hard work. But okay... and the children, me too, weekly I hold a virtual meeting with them, you know?! Some of them have parents who work... sometimes, they only have one mobile phone and the parents need to take the mobile with them, so the child has no [internet] access, you feel sorry for them... So, what do I do? Sometimes, I hold a virtual meeting with two children and I hold one with a group in the afternoon and sometimes I hold [a meeting] with two children around eight in the evening, to work on what I'd been teaching earlier, you know, because I'm not going to leave them out. So, when the parent arrives with the mobile, allowing them to enter into contact. So, then, the situation is hard work, but it's okay, it's fine.

Through the account of her workday, it becomes clear why Marilene considers "the situation is hard work" (*a coisa tá puxada*), since she is busy from morning to evening, not just with the formal demands of teaching, issuing the children tasks to complete, and keeping herself uptodate – all requirements set

by the school. She is also concerned with accommodating the different dynamics, conditions and needs of her students and their families. Our attention is drawn to the passages where she talks about the students wanting to "contact" her. The narrative reveals an ethics that is not limited to an evaluation of the good separate from ordinary practices but rather an *ordinary ethics* impossible to be captured in a manual since it is more like a "spirit that infuses everyday life" (Das, 2020b: 98).

The expressions of Marilene highlighted above are especially revealing of an ethics that runs hand-in-hand with the work of care. As Laugier (2015) suggests, this requires a reorientation towards vulnerability, a change from the "just" to the "important." Vulnerability here is conceived as a common feature of the human *form of life*, which needs to be involved in care relations to survive. Thus, there is nothing more ordinary than vulnerability – or as Laugier suggests, it is vulnerability that defines the ordinary. In this sense, care can be conceived as the protection of a *form of life,* especially in contexts where the everyday is being destroyed.

Children, a *form of life* performed as "vulnerable" and "dependent," are a valorised life that "should not be left out," being actively preserved *through* and *in* relations of care. In actions guided by an *ordinary ethics*, the teacher Marilene feels "sorry" for them and makes every effort to "not leave anyone out." We found particularly significant the passage in which she remarks that her students frequently phone her to "hear the voice" of their teacher. It also seems plausible that it may be precisely the opposite too: namely, the children call to have their own voices heard.

Daniel and his grandmother: the tension between voice and silencing

From the beginning of the pandemic, Daniel displayed a great concern for his grandmother. He was the one who warned his parents about the precautions that needed to be taken and believes that this is what prompted his grandmother's transfer to his parents' house. At different moments of the interview, he demonstrated his annoyance over his grandmother's perceived "stubbornness," reflected not only in her behaviour prior to the pandemic but also in the resistance that she displays to medications and to "caring for herself." Marilene, at a certain point in her interview, repeated Daniel's interpretation of the reason for his "grandma's" resistance:

> we explained, explained to mother, but I don't know, perhaps because she's at a senile age, it seems that mother doesn't understand. My son teases: 'if it was a stampede of elephants coming, grandma would see, she would see it was dangerous; now, because it's the virus, something she cannot see, grandma doesn't understand.' So we always put this to her.

Daniel, reproducing conversations with his family, explained that he had tried to use reason to explain the situation to his grandmother:

> and she said 'no, but for me bla-bla-bla' and mother said 'it's no use discussing it.' You know when you want the best for someone but they have their own set ideas? But there was no real conflict, becoming annoyed, in the end we even see the funny side…

Though no "real conflict" occurred, he mentions that, despite recognizing that his grandmother really wanted to return to her own apartment after almost five months in her daughter's house, he was opposed to the idea when his parents finally granted her wish. In his view, his grandmother "plays a psychological game" because she had been "very pampered by my grandfather, somewhat *dondoca*, not in terms of possessions, but in terms of being spoilt by my grandfather and by everyone else in the family. And now she's alone, without grandpa, she misses him and does things to call attention…" In the conversations with Marilene, for whom, according to him, being concerned and providing care "is part of her nature," she advises that: "sometimes you have to give a reality check to grandmother, you have to take out the dummy and let the baby cry a little to calm down."

Analysing the interviews as a whole, we can note the extent to which the voices of some members of the family compose the dialogues of the others. Indeed, the grandmother makes her voice present through dialogues repeated in all the interviews. But her voice normally appears accompanied by expressions that attest to her senility, accentuating her vulnerability. Even though both Daniel and his grandmother had gone to live with Marilene and Pedro in the pandemic, as they unfold the narratives on the family dynamics suggest an unequal distribution of vulnerabilities (Butler, 2019) with the grandmother more susceptible to care strategies. The grandmother is thus generally depicted as someone with a limited capacity for comprehension and as a child who uses emotional strategies to get what she wants. It is impossible to tell whether this negative perception of her already existed previously, but it can be deduced that the pandemic context impacted the perception of old age in general, casting a specific kind of light on older people. As we discuss in the next section, the public *language games* constituted during the pandemic have shaped "the elderly person" as a *form of life* with childish characteristics and a reduced intellectual capacity, someone who needs to be guided along the right path and/or controlled (Schuch, Víctora & Siqueira, 2021).

Given this fact, one line of interpretation would be to compare the *forms of life* of the "child" and the "elderly person," which – despite being attributed with similar traits, such as a limited capacity for comprehension, "neediness" and "stubbornness" – are treated differently. The children in Marilene's story suffer from being "very needy," worthy of "pity," which authorizes them to call her at any hour to hear their teacher's voice or for their voice to be heard by her. The "elderly woman," in Daniel's case, is depicted as someone who engages in a "psychological game" and, despite having her voice reproduced in

the family narratives, a permanent attempt is made to silence her, whether in the configuration of her senility – explicit in the tensions generated by the return to her own apartment – or in the refusal to allow her to be interviewed for this study. In one case, *ordinary ethics* appears to be present, in the other, it appears to be absent.

But taking such an approach would mean reifying dichotomies long since deconstructed and reducing the complexity of the notions of *ordinary ethics* and *care* alike. To encapsulate *ordinary ethics* and *care* in the presence/absence dichotomy would be to reduce *ordinary ethics* to an "ethics of actions that can be isolated and judged," the opposite of Das's proposal. It would be a failure to perceive care as an open, unstabilized process, composed of continuous and complex interactions and interventions (Mol, 2008; Kittay, 1999), marked by power dynamics that are themselves malleable (Biehl & Locke, 2017). In line with Biehl, we highlight the shifting terrain on which care is developed, where practices aimed at achieving "the good" are intimately linked to the possibility of "negligence" and the "bad" (Biehl, 2012: 248). Furthermore, it would be to attempt to define an end to a history that is still unfolding, just so that it might be concluded within the parameters of an article.

We have opted, therefore, to pursue another direction and comprehend Daniel's actions through Das's proposal to avoid encapsulating histories and to think about relations through an ethics of living life with other people, an *ethics of being together* (Das, 2015b). In a particularly inspiring passage, the author elaborates on an insight made by Michael D. Jackson concerning the life lived with other people:

> A life with the other, as Michael Jackson (1998) notes, consists of a myriad of minor moments of shared happiness and sympathetic sorrow, of affection and disaffection, of coming together and moving apart, so that what emerges is far from a synthesis to which one can assign a name or pin down as something one can know (Das, 2018: 541).

What we wish to convey through this idea is that Daniel's small acts of warning his parents about the risks "for the elderly" who "if they catch it, die," as well as staying in the guest bedroom so as not to dislodge his grandmother and avoiding trips to the gym while living in the same house as her, while simultaneously trying numerous times to explain the situation to his grandmother, who "seems like she doesn't understand," is less a deliberate attempt to disqualify the "elderly" and more a simple expression of "living life with the other" – as "a myriad of minor moments" to which one cannot assign a name or define something one can know.

Trying to comprehend these dynamics of "living life with the other" is also to pay attention to an unstabilized history, a history of transformations not susceptible to major totalizations or polarizations (Biehl & Locke, 2017) – such as, for instance, the contrast between care and control – maintaining our

focus on the tensions inevitably involved in the small ordinary ethical decisions that become juxtaposed in the open temporalities of situated cartographies, inhabited by people in their relations of interdependence lived in equally transformable worlds.

ELDERLY AND OLD: LANGUAGE GAMES IN THE PANDEMIC

Avoiding the foreclosure of complex histories in fixed binarisms also means working through the tensions inhabiting the relations between ordinary and extraordinary. In our research, one of these tensions was concentrated precisely in the configuration of the "elderly" as a preferential "risk group" for contagion and the complex and simultaneous dynamics of care and control resulting from this configuration. This perception of risk initially reached us in an ethnographic form through Daniel's narrative, when he stressed the greater susceptibility of elderly people to dying from covid-19 and justified the importance of the family taking preventative measures in relation to his grandmother, who had been living alone prior to the pandemic.

On the other hand, the emphasis on elderly people was strongly present through various public language games, explicit in interviews with specialists in biomedical areas who debated the number of people affected by the disease and explained the greater vulnerability of the elderly population, but also found in a proliferation of memes that pervaded the social networks. These memes associated the "elderly" (*idosos*) with childish and infantilizing images, emphasizing their "stubbornness" and their incapacity to take decisions relating to their life and health (Beltrão, 2020; Debert & Félix, 2020; Dourado, 2020; Schuch, Víctora & Siqueira, 2021).

In our view, the popular images of the *cata veio*, "old people catcher" – and others that draw a parallel with the *carrocinhas de cachorro*, dog impounder trucks, to be used to abduct *idosos* who might wander into the street – work to construct a dependent *form of life* (the *veio,* "old codger") that requires the same type of control as animals or children, supposedly without consciousness or control of their actions. This lack of control is seen to justify the violence expressed by the image of the containment pens and the slipper used to punish supposed disobediences. These humorous memes, jokes and videos are not, as some might suggest, ways of coping with the difficulties imposed by the pandemic through humour – "laughing so as not to cry." On the contrary, they compose a politics of moral constraint that works in conjunction with policies regulating and restricting behaviour aimed specifically at the elderly population (Schuch, Víctora & Siqueira, 2021).

We should stress that we are not claiming that a widespread consensus exists surrounding this concept, or object, of the *idoso* in the performance of the *veio*. Our purpose here is to show how the very disputes and tensions that emerge around the term contribute to shaping a *form of life* entangled in what we could

call pandemic *language games*. Here is seems appropriate to recover two aspects of Cavell's thought highlighted by Das (2020b), which we shall discuss briefly given their relevance to the ethnographic case explored in this article. The first is that there are two dimensions to *forms of life*, one horizontal (or ethnological) and the other vertical (or biological). The second is that *forms of life* contain within themselves *forms of death*.

Referring to these two dimensions, Cavell suggests that in the horizontal direction – with an emphasis on *form* – one can grasp the notion of human diversity, in other words, the ways in which *forms of life* vary among different societies (as an example, he refers to institutions like marriage and inheritance as socially variable *forms of life*). In the vertical direction – with an emphasis on *life* – we encounter linguistic distinctions between "superior" and "inferior" forms of life (his examples are picking at food with a fork or grabbing and pecking it with claws or beaks). In other words, it is in the vertical dimension of forms of life that "marks the limit of what is considered human in a society and provides the conditions of the use of criteria as applied to others" (Das, 2020b: 41).

Albeit while running the risk of eroding the meaning attributed to the two dimensions by Cavell, it seemed to us productive to reflect on the construction of *idosos* (the elderly) as a *form of life* in the context of the pandemic in these two senses. In the horizontal dimension, with its emphasis on *form*, its meaning and importance have proven variable and disputed in different times and spaces. Among other *forms*, *idosos* may be respected as wise elders or as guardians of a people's memory, or they may be incorporated as essentially vulnerable and fragile, deserving of care. In the vertical dimension, which hierarchizes the *lives* of *forms of life*, we can perceive two languages disputing with one another: one relating to the autonomy and independence constructed, for instance, in the policy of active aging in which "superior" lives are situated.[6] This language provides the criteria that will be applied to other "inferior" *forms of life*, such as, for example, the form to which the *veios* (oldies) pertain in the pandemic *language games*. The *veios* are dependent *forms of life*, with childish and "stubborn" characteristics, devoid of rationally and, therefore, similar to animals to be kept in "cages" or taken away by the "dog truck."

Given this, the second aspect raised by Cavell and Das (2020b) is extremely pertinent, namely that *forms of life* contain within themselves *forms of death* that are produced in everyday life itself. More precisely, because *forms of life* and *forms of death* are engulfed in one another, we need to pay attention to the disputes and tensions between the consensuses on *forms of life*, which are much more unstable and complicated than they may first appear.

FINAL CONSIDERATIONS

In this article we argue that the pandemic caused by the new coronavirus is constituted as an extraordinary time in which ordinary life is nourished through

work and relations shaped as care practices that sustain life. These care practices, as part of the ordinariness of the domestic, are, like the latter, invisible and most of the time pass unnoticed. As Laugier (2016: 208) emphasizes, to comprehend the importance of care, it is essential, above all, to recognise the vulnerability of forms of life. It is through their analysis that we can understand the perception of the collaborators of this research that "almost nothing changed." Here the "extraordinary" of the pandemic emerges as a time/space that coexists in the ordinariness of the infrastructure and interrelations that sustain it and the forms of life that populate it.

This in mind, we can probe our research question in more depth and ask not only about the alterations provoked by the pandemic but also how much and in what ways the pandemic and – as Das (2015b: 114) puts it – "living with the fragility, vulnerability, joys, and sorrows that everyday life entails might reveal the contours of our ethical lives".

Through the analysis of the narratives of a white middle-class family living in southern Brazil, based around the everyday life of their family relations during the covid-19 pandemic, we have seen how the pandemic allowed three different generations to live together, producing the reorganisation of a quotidian based on a "life lived with others" between Marilene, Pedro, Daniel, his grandmother and the domestic workers, also involving neighbourhood relations, as well as temporary and contingent arrangements and rearrangements of the homes as care infrastructures. In the overlapping of such relations, we can perceive processes of family interdependences and neighbourhood relations that are forms of support in which the subjects develop and negotiate their capacities to continue, repair and live the world in the best form possible.

Marilene's perception that "the situation is hard work, but it's okay, it's fine" reveals the house as a care infrastructure and shows how these care relations are gendered, while simultaneously revealing the entanglement between the extraordinary of the pandemic and the ordinary of everyday life, which remakes itself continuously, incorporating the event into the reproduction of the quotidian. As Marilene said: "The situation is hard work" in terms of the care needed with the production of the house, since the latter was made and remade following the arrival of her elderly mother, the son with his "fully-equipped apartment" – including rats and tarantulas – as well as the increase in her work as a teacher of primary school children, conducted online via computer and mobile phone. To the extent that these care infrastructures are transparent, naturalized and encompassing, they reproduce conventional relations such as the gendering of care work – constant work that is perceived as "okay," "fine," naturalizing a perception that, despite being "hard work" during the pandemic, this new context "changed almost nothing" in terms of day-to-day life.

Approaching care as a practical activity sensitive to the details of everyday life, we underline the pertinence of the notion of an *ordinary ethics* devel-

oped by Veena Das, based not on universal principles or moral values but setting out from the real experiences and problems of people in their everyday life. By including these dimensions in our comprehension of the dynamics present in the family narratives, we can perceive the invisible and invisibilized work of maintaining ordinary life and how the focus on three generations living together in the same home, one of the temporary strategies used by the family in the setting of the health emergency provoked by the pandemic, was able to reveal the entanglements between the ordinary and the extraordinary. At the same time, these relations made visible broader aspects surrounding differentiations of gender, age, race and class that traversed care relations, while also allowing us to comprehend how such relations developed in the domestic environment are active devices in which *forms of life* are constituted. Inspired by Veena Das's ideas, we argue for the connection between *ordinary ethics* and *forms of life*, emphasizing how domestic space is not just a fundamental care structure in the Brazilian scenario of social and political vulnerability, but also an active element in which *forms of life* acquire form and life.

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NOTES

1   This work results from the project "Covid-19 in Brazil: analysis and response to the social impacts of the pandemic among health professionals and the isolated population" (Agreement Ref.: 0464/20 Finep/UFRGS). The research is developed by the Covid-19 MCTI Humanities Network and forms part of the set of actions of the MCTI Virus Network financed by the Ministry of Science, Technology and Innovations (MCTI) to confront the pandemic. The research with senior citizens is being conducted by a broader team of researchers who we thank for their collaboration: Caroline Sarmento, Cauê Machado, Fernanda Rifiotis, Lauren Rodrigues, Mariana Picolotto, Pamela Ribeiro, Roberta Ballejo and Taciane Jeske.

2   On this topic, see Beltrão (2020), Dourado (2020), Debert & Félix (2020) and Schuch, Víctora & Siqueira (2021).

3   As the literature on care highlights and our article helps elucidate, care relations are politically situated and, in this sense, marked by class, gender, race and ableism. In Brazil, the importance of the house as a care infrastructure and its class, gender and race/colour differentiations have been foregrounded by a recent anthropological literature, with which we dialogue here, emphasizing the situationality of the forms in which care appears here in the context of this white middle-class family from southern Brazil. In terms of the dynamics of care among popular (low-income) groups, the field of studies on disabilities has been proven a fertile source of insights. See, among other examples, the work of the researchers Aydos & Fietz, 2017; Fietz, 2017, 2020; Fonseca & Fietz, 2018; and Engel, 2013, 2017.

4   Another methodological reference here is the research of Fleischer, Lima and collaborators, who accompanied families with children with microcephaly caused by the Zika virus through half-yearly contacts over a four-year period (Fleischer & Lima, 2020).

5   Porto Alegre, the capital of Rio Grande do Sul, Brazil's southernmost state.

6   "Active aging" argues for the responsibility of older people to remain active and healthy for as long as possible,

as well as participating in community life, assuming the commitment to guarantee their rights and taking on the role of protagonists in the exercise of citizenship. The active aging proposal expands the concept of "health aging" already developed by the United Nations, based on the recognition of the human rights of old people and on the principles of independence, participation, dignity, assistance and self-realization (WHO, 2005).

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"NÃO MUDOU QUASE NADA": ÉTICA ORDINÁRIA E FORMAS DE VIDA EM TEMPOS PANDÊMICOS

Resumo

Neste artigo refletimos sobre o cotidiano de uma família branca de classe média moradora no sul do Brasil durante a pandemia de Covid-19. Considerando o cuidado uma atividade prática sensível aos detalhes do cotidiano, destacamos a relevância da noção de ética ordinária desenvolvida por Veena Das. Pelas narrativas dos membros dessa família percebemos o trabalho invisível e invisibilizado de manutenção da vida ordinária e os entrelaçamentos entre o ordinário e o extraordinário nas relações de três gerações na mesma casa. Por fim, argumentamos a conexão entre a ética ordinária e as formas de vida, ressaltando que o espaço doméstico, além de estrutura fundamental de cuidado no cenário brasileiro de vulnerabilidade social e política, é também um ativo elemento em que formas de vida ganham forma e ganham vida.

"ALMOST NOTHING HAS CHANGED": ORDINARY ETHICS AND FORMS OF LIFE IN PANDEMIC TIMES

Abstract

In this article, we reflect on the daily life of a white middle-class family living in southern Brazil during the Covid-19 pandemic. Approaching care as a practical activity sensitive to the details of everyday life, we emphasize the relevance of the notion of *ordinary ethics* developed by Veena Das. Through the narratives of members of this family, it is possible to see the invisible and invisiblized work necessary to maintain ordinary life and the weaving together of the ordinary and the extraordinary revealed in the relationship of three generations in the same house. Finally, we argue for the fundamental connection between ordinary ethics and forms of life, highlighting how the domestic space is not only a crucial structure of care in the Brazilian scenario of social and political vulnerability, but is also an active element in which forms of life take form and come to life.